PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

117317

CLAIMS AS FILED - PART I (Column 1) (Co						SMALL ENTITY olumn 2) TYPE				OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			17				F	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			<i>j</i>		*	Ð		X\$ 9=		OR	X\$18=	0
INDEPENDENT CLAIMS					*	2		X42=		OR	X84=	0
MU	LTIPLE DEPEN	DENT CLAIM PI	ESENT					+140=		OR	+280=	D
* If	the difference	in column 1 is	less than ze	s than zero, enter "0" in column 2			ı	TOTAL		OR	TOTAL	250
CLAIMS AS AMENDED - PART II											OTHER	
	ANNOTAL AND MINISTERS OF THE AND	(Column 1)	Ten and the second	(Column 2) HIGHEST		(Column 3)		SMALL E		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	<u></u> _		<u> </u>		X42=	'	OR	X84=	
	THOTFILL	INTATION OF IM	JETTP LE DET	LINDEN	CLANI		¹	+140=		OR	+280=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	•	ADDIT. FEE			ADDII. FEE	-
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=	i .	OR	X\$18=	
AME	Independent	*	Minus	***		<u> -</u>		X42=		OR	X84=	
Ĺ	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDEN	CLAIM		J	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)				•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME.	Independent	*	Minus	***		=] [X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
*	If the entry is sele	mn 1 is less than t	ho ontre in only	ımn Q	o "O" in c-	olumn 2		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												